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RULE				

APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *None See*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None See*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	IL	13	21/18	3
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>ak</i> Initials			

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TITLE

Method and system for interprocedural side effect analysis

FILING FEE RECEIVED 858	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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